

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled PROFILING AND CATALOGING EXPRESSED PROTEIN TAGS, the specification of which

☒ is attached hereto.

☐ was filed on _____ as Application Serial No. _____ and was amended on _____.

☐ was described and claimed in PCT International Application No. _____ filed on _____ and as amended under PCT Article 19 on _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim the benefit under Title 35, United States Code, §119(e)(1) of any United States provisional application(s) listed below:

U.S. SERIAL NO.	FILING DATE	STATUS
<u>60/135,728</u>	<u>May 25, 1999</u>	PENDING
<u>60/096,291</u>	<u>August 12, 1998</u>	PENDING

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Janis K. Fraser, Reg. No. 34,819; William E. Booth, Reg. No. 28,933; Eldora L. Ellison, Reg. No. 39,967; David L. Feigenbaum, Reg. No. 30,378; John W. Freeman, Reg. No. 29,066; Timothy A. French, Reg. No. 30,175; Anita L. Meiklejohn, Reg. No. 35,283; and Ralph A. Mittelberger, Reg. No. 33,195

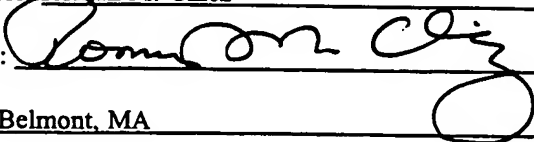
Address all telephone calls to Janis K. Fraser at telephone number 617/542-5070.

Address all correspondence to Janis K. Fraser, Fish & Richardson P.C., 225 Franklin Street, Boston, MA 02110-2804.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

COMBINED DECLARATION AND POWER OF ATTORNEY CONTINUED

Full Name of Inventor: Roman M. Chicz

Inventor's Signature: 

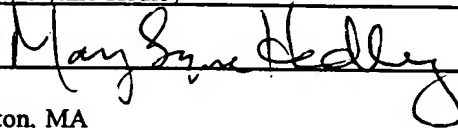
Date: July 29, 1999

Residence Address: Belmont, MA

Citizen of: USA

Post Office Address: 4 Cottage Street, Belmont, MA 02478

Full Name of Inventor: Mary Lynne Hedley

Inventor's Signature: 

Date: July 29 1999

Residence Address: Lexington, MA

Citizen of: USA

Post Office Address: 51 Follen Road, Lexington, MA 02173

Full Name of Inventor: Charles Hsu

Inventor's Signature: _____

Date: _____

Residence Address: San Francisco, CA

Citizen of: USA

Post Office Address: 2106 Scott Street, Apt. C, San Francisco, CA 94115

Full Name of Inventor: Robert G. Urban

Inventor's Signature: 

Date: 7-29-99

Residence Address: Lexington, MA

Citizen of: USA

Post Office Address: 51 Follen Road, Lexington, MA 02173

COMBINED DECLARATION AND POWER OF ATTORNEY CONTINUED

Full Name of Inventor: Roman M. Chicz

Inventor's Signature: _____ Date: _____

Residence Address: Belmont, MA

Citizen of: USA

Post Office Address: 4 Cottage Street, Belmont, MA 02478

Full Name of Inventor: Mary Lynne Hedley

Inventor's Signature: _____ Date: _____

Residence Address: Lexington, MA

Citizen of: USA

Post Office Address: 51 Follen Road, Lexington, MA 02173

Full Name of Inventor: Charles Hsu

Inventor's Signature:  Date: 10 Aug 1999

Residence Address: San Francisco, CA

Citizen of: USA

Post Office Address: 2106 Scott Street, Apt. C, San Francisco, CA 94115

Full Name of Inventor: Robert G. Urban

Inventor's Signature: _____ Date: _____

Residence Address: Lexington, MA

Citizen of: USA

Post Office Address: 51 Follen Road, Lexington, MA 02173

Revised: August 24, 1994 (39)DECLMRO

BEST AVAILABLE COPY